



PTO/SB/17 (01-06)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,240.00)

Complete if Known	
Application Number	10/809,402-Conf. #7541
Filing Date	March 26, 2004
First Named Inventor	Cristian E. ANGHEL
Examiner Name	J. Moffat
Art Unit	2863
Attorney Docket No.	H0005161-3134 (BSKB: 2929-0229P)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
26	- 26 =	x	=		
HP = highest number of total claims paid for, if greater than 20.					
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
2	- 3 =	x	=		
HP = highest number of independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	- 100 =	/50 (round up to a whole number) x	=	

<u>4. OTHER FEE(S)</u>		<u>Fees Paid (\$)</u>
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...		790.00
1252 Extension for response within second month		450.00

<u>SUBMITTED BY</u>		<u>Registration No.</u> (Attorney/Agent)	<u>Telephone</u>
Signature		40,439	(703) 205-8035
Name (Print/Type)	D. Richard Anderson	Date	July 28, 2006



AMENDMENT TRANSMITTAL LETTER			Docket No. H0005161-3134 (BSKB: 2929-0229P)		
Application No. 10/809,402-Conf. #7541	Filing Date March 26, 2004	Examiner J. Moffat	Art Unit 2863		
Applicant(s): Cristian E. ANGHEL et al.					
Invention: ADAPTIVE POSITION SENSING METHOD AND APPARATUS FOR SYNCHRONOUS MOTOR GENERATOR SYSTEM					
MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	26	- 26 =		x	
Independent Claims	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within second month				1,240.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				1,240.00	
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u> </u> . A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> A check in the amount of \$ <u>1,240.00</u> is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Dated: <u>July 28, 2006</u>					
<u>D. Richard Anderson</u> Attorney Reg. No.: 40,439					
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